

## APPLICATION DATA SHEET

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
CD-ROM or CD-R?:: None  
Sequence Submission?:: Paper  
Computer Readable Form (CRF)?:: Yes  
Number of Copies of CRF:: 1  
Title:: Methods and Composition for Diagnosing and Treating  
Pseudoxanthoma Elasticum and Related Conditions  
Attorney Docket Number:: PXE-001C1  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 6  
Small Entity?:: Yes

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status::  
Given Name:: Charles  
Middle Name:: D.  
Family Name:: Boyd  
City of Residence:: Honolulu  
State or Province of Residence:: Hawaii  
Country of Residence:: US  
Street of Mailing Address:: 3330 Paty Drive  
City of Mailing Address:: Honolulu  
State or Province of Mailing Address:: Hawaii  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 96822

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Hungary  
Status::  
Given Name:: Katalin  
Family Name:: Csiszar  
City of Residence:: Honolulu  
State or Province of Residence:: Hawaii  
Country of Residence:: US  
Street of Mailing Address:: 3330 Paty Drive  
City of Mailing Address:: Honolulu  
State or Province of Mailing Address:: Hawaii  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 96822

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status::  
Given Name:: Olivier  
Family Name:: LeSaux  
City of Residence:: Honolulu  
State or Province of Residence:: Hawaii  
Country of Residence:: US  
Street of Mailing Address:: 2745 Terrace Drive  
City of Mailing Address:: Honolulu  
State or Province of Mailing Address:: Hawaii  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 96822

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Hungary  
Status::  
Given Name:: Zsolt  
Family Name:: Urban

City of Residence:: Honolulu  
State or Province of Residence:: Hawaii  
Country of Residence:: US  
Street of Mailing Address:: 2640 Dole Street, Apt. A1  
City of Mailing Address:: Honolulu  
State or Province of Mailing Address:: Hawaii  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 96822

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status::  
Given Name:: Sharon  
Family Name:: Terry  
City of Residence:: Potomac  
State or Province of Residence:: MD  
Country of Residence:: US  
Street of Mailing Address:: 9028 Willow Valley Drive  
City of Mailing Address:: Potomac  
State or Province of Mailing Address:: MD  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 20854

**Correspondence Information**

Correspondence Customer Number:: 021323

**Representative Information**

Representative Customer Number:: 021323

**Domestic Priority Information**

|                  |   |                      |                      |
|------------------|---|----------------------|----------------------|
| Application::    | Continuity Type::                                       | Parent Application:: | Parent Filing Date:: |
| This application | Continuation of   | 09/792,616           | 02/23/01             |
| 09/792,616       | An application claiming the benefit under 35 USC 119(e) | 60/184,269           | 02/23/00             |

### **Assignee Information**

Assignee Name:: PXE International, Inc.  
City of Mailing Address:: Washington  
State or Province of Mailing Address:: D.C.  
Country of Mailing Address:: US

Assignee Name:: The University of Hawaii  
City of Mailing Address:: Honolulu  
State or Province of Mailing Address:: Hawaii  
Country of Mailing Address:: US